

**COUNTY BOROUGH OF BOOTLE.**



**ANNUAL REPORT**  
**OF THE**  
**MEDICAL OFFICER OF HEALTH**  
**FOR**  
**1947.**

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BOOTLE TIMES, 30, ORIEL ROAD.

1948.

HEALTH DEPARTMENT,  
TOWN HALL,  
BOOTLE,  
May, 1948

*To the Mayor, Aldermen and Councillors  
of the County Borough of Bootle.*

MR. MAYOR, MRS. ALDERMAN PRITCHARD, AND GENTLEMEN,

I have the honour to present the seventy-fifth Annual Report on the work of the Health Department. Its submission, coinciding with the date appointed for the coming into force of the National Health Service Act, 1946, and the National Assistance Act, 1948, transferring certain health functions of the Local Authority to a Regional Hospital Board, and conferring on the Council other powers and imposing other duties in connection with mental health and social welfare, marks the conclusion of the second phase of local government activities to promote the health of the people. Broadly speaking, the first thirty or forty of these reports were factual statements recording the unsatisfactory vital statistics, including accounts of epidemics of smallpox, typhus and typhoid fevers and of outbreaks of measles, scarlet fever and diphtheria with high fatality rates, and noting defects in the environmental hygiene of the district. From 1908 onwards they became more closely concerned with efforts to improve personal hygiene through the creation of services dealing with maternity and child welfare, tuberculosis, and venereal disease; and henceforth, with the passing to nominated Regional Boards and Executive Councils of responsibility for the care of the sick, whether in institutions or at home, they may be expected to concentrate on functions more pertinent to Preventive Medicine and to deal with an ever extending list of diseases and departures from health produced by adverse social, industrial and domestic factors, as well as to devote increased attention to the care of the physically and mentally handicapped.

Attention is directed to the following points of interest in the statistical and other records of the year:—

- (1) A further rise in the birth rate to 30·3 per thousand, maintaining the large excess locally over the national birth rate figures; and the delivery of these 2,022 infants without a single maternal death.

- (2) A slight rise in the death rate.
- (3) A substantial rise in the infant mortality rate attributable largely to an increased number of deaths from gastro-intestinal infection.
- (4) A continuance of outbreaks of measles and whooping cough, a slight fall in the incidence of scarlet fever, and a substantial decrease in the number of cases of diphtheria.
- (5) A resumption in the decline of mortality from tuberculosis with the death rate from this cause of less than one per thousand recorded for the first time.
- (6) A decline in the incidence of venereal disease.
- (7) A worsening of the housing position and a consequent increase in the physical, mental and moral hardships resulting therefrom.
- (8) The preparation of proposals to implement the new powers and duties of the Council under the National Health Service Act, 1946.
- (9) The anticipation of the placing on the Council by the National Assistance Act of powers and duties for the care of the aged by arranging with the Social Science Department of the University of Liverpool for a survey of the extent and nature of the needs of the elderly in the Borough, coupled with a beginning of material aid by the institution of a scheme for delivery of hot meals at homes.

My Annual Report for 1944 contained a review of public health circumstance in the Borough during the twenty-five years which I had then completed as your Medical Officer of Health, and a further examination of that nature is therefore not called for now. That retrospect was presented with a modicum of satisfaction in what had been achieved, and with due appreciation of what remains to be done before the unborn infant can be assured of a safe delivery, healthy infancy, childhood and adolescence, followed by the maximum span of productive maturity and by comfort in old age; and it may be repeated that a realisation of the progress towards these objectives made by the public health workers and social reformers of yesterday constitutes a firm basis for confidence that the next quarter-century will see further advance in their attainment.

In submitting this, my final report, I wish to pay tribute to the staff of the Department—medical, nursing, inspectorial and clerical—and to their loyalty and assiduous devotion to duty. Dr. R. Hannah, Tuberculosis Officer, will conclude his twenty-seven years' appointment with this Council on the transfer to Regional Hospital Board of responsibility for this service, and accompanying me into retirement are two other officers of long service who have given outstanding contributions to the work of the Department—Mr. W. Robson, Chief Sanitary Inspector, and Mr. N. Lockwood, Administrative Assistant—and there will then remain only two individuals who were in the service when I joined it in 1920; and grateful acknowledgement is made of the fact that the direction and supervision of the labours of these officers and of their colleagues of to-day and yesterday have been pleasurable responsibilities. The cordial relationship with, and the ready co-operation of, the other Chief Officers of the Corporation, particularly close during the war period, have been pleasing features of my service, and my indebtedness to the members of the Council, collectively and individually, requires special mention. Their generosity in allowing me to serve for many years on the Councils of the Society of Medical Officers of Health, the Royal Sanitary Institute, and the British Medical Association; to study public health administration in Denmark under the auspices of the League of Nations early in my career, and last year to see something of public health practice in the United States as a representative of the Royal Sanitary Institute, is gratefully acknowledged, with the belief that the contacts thereby made and the knowledge so gained have added to my usefulness in my own office.

In conclusion I record, and not as a mere form of words, my gratitude to the present Chairmen of Committees which I serve, as well as to their predecessors and members of the Council in general, for their readiness to consider and, when judged possible, to act upon recommendations made by me during the last twenty-eight years to improve the public health of the Borough.

I have the honour to be

Your obedient servant,

F. T. H. WOOD,

*Medical Officer of Health*



## STATISTICAL SUMMARY FOR 1947.

|  |     |     |     |     |     |     |  |
|--|-----|-----|-----|-----|-----|-----|--|
| Civilian Population (Registrar-General's estimate) at mid-year |     |     |     |     |     |     |  |
| 1947   | ... | ... | ... | ... | ... | ... | 66,610   |
| Area in Acres (exclusive of river bed)                         |     |     |     |     |     |     | 2,414  |
| Inhabited houses (end of 1947) according to rate books         |     |     |     |     |     |     | 15,549   |
| Uninhabited houses (end of 1947) according to rate books       |     |     |     |     |     |     | 101  |
| Population at Census of 1931                                   |     |     |     |     |     |     | 76,770   |
| Live Births—   |     |     |     |     |     |     |  |
| Males 1042; Females 980 ... Total 2022.                        |     |     |     |     |     |     | Birth rate 30·3                                      |
| Still Births—  |     |     |     |     |     |     |  |
| Males 35; Females 28 ... Total 63.                             |     |     |     |     |     |     | Rate per 1,000 total<br>(live and still) births 30·2 |
| Total deaths ... 866   |     |     |     |     |     |     | Death rate 13·0                                      |
| Number of women dying in, or in consequence of, childbirth—    |     |     |     |     |     |     |  |
|  |     |     |     |     |     |     | Rate per 1,000 total<br>(live and still) births      |
| Deaths   |     |     |     |     |     |     |  |
| Puerperal sepsis   | ... | Nil | ... | ... | ... | Nil |  |
| Other puerperal causes...                                      |     | Nil | ... | ... | ... | Nil |  |
| Number of deaths of Infants (under the age of one year)        |     |     |     |     |     |     | 185  |
| Death Rate of Infants under one year of age per 1,000 live     |     |     |     |     |     |     |  |
| births— Legitimate. 90; Illegitimate. 111 ...                  |     |     |     |     |     |     | Total 91·5   |
| Deaths from Whooping Cough (all ages)                          |     |     |     |     |     |     | 4  |
| Deaths from Diarrhoea (under 2 years of age)                   |     |     |     |     |     |     | 59   |
| Death Rate from Respiratory Tuberculosis per 1,000             |     |     |     |     |     |     | 0·81   |
| Death Rate from all forms of Tuberculosis per 1,000            |     |     |     |     |     |     | 0·92   |

The Rateable Value of the Borough as at April 1947 was £477,556  
The estimated product of a Penny Rate for 1947-48 ... £1,881  
In 1947-48 the General Rate was 18/11 in the pound (excluding water rate and charges).  
The cost of the Health Services during 1947-48 was estimated at £72,550, equivalent to a rate of 3s. 2·59d. in the pound.

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COUNTY BOROUGH OF BOOTLE.

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**ANNUAL REPORT**

OF THE

**MEDICAL OFFICER OF HEALTH**

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**I.—VITAL STATISTICS.**

*Population.*—At the Census in 1881 the population enumerated was 27,374; in 1891, 49,217; in 1901, 58,556; in 1911, 69,876; in 1921, 76,487; and in 1931, 76,770.

On 18th May 1948 the Registrar-General intimated that his estimate of civilian population at mid-year 1947 was **66,610**. This estimate shows that the population of the Borough last year was some 2,260 more than in the summer of 1946, and the latest quarterly estimate of the Registrar-General gave the population as 67,480 on 31st December 1947.

*Marriages.*—The Superintendent Registrar has been good enough to furnish me with figures of marriages during recent years which show that the rise which occurred in the first two years of the war was followed by figures well below the normal until 1944; an increase is again recorded this year. The totals for the ten years commencing 1938 have been 653, 731, 891, 659, 576, 469, 491, 619, 629 and 662 respectively.

*Births.*—During the year there were registered 2,022 births to Bootle parents, representing a birth rate of **30·3 per 1,000** of the population, that for England and Wales being 20·5. In 1946 the Bootle birth rate was 27·9 and for the decennium 1936-45 it was 23·4. There were 1,042 male and 980 female births. It will be noted that the birth rate, which reached a maximum after the first war of 29·7 in the first quarter of 1920 and a minimum in 1938, rose towards the end of the

late war, attained a maximum of 28·2 in 1944, fell somewhat in 1945, and this year has again risen; as usual, it is well above the national rate.

| Period.       | BOOTLE. |                 | ENGLAND & WALES |
|---------------|---------|-----------------|-----------------|
|               | Births. | Rate per 1,000. | Rate per 1,000. |
| 1873—1880 ... | 6,846   | 38·6            | 35·4            |
| 1881—1890 .   | 15,508  | 36·8            | 32·4            |
| 1891—1900 ... | 17,716  | 33·2            | 29·9            |
| 1901—1910 ... | 20,468  | 32·3            | 27·2            |
| 1911—1920 ... | 20,748  | 27·6            | 21·8            |
| 1921—1930 ... | 18,884  | 22·8            | 18·4            |
| 1931—1935 ... | 8,367   | 21·8            | 15·0            |
| 1936—1940 ... | 7,959   | 21·6            | 14·9            |
| 1941 ...      | 1,199   | 22·8            | 14·2            |
| 1942 ...      | 1,104   | 23·9            | 15·8            |
| 1943 ...      | 1,327   | 26·5            | 16·5            |
| 1944 ...      | 1,574   | 28·2            | 17·6            |
| 1945 ...      | 1,429   | 24·4            | 16·1            |
| 1946 ...      | 1,797   | 27·9            | 19·1            |
| 1947 ...      | 2,022   | 30·3            | 20·5            |

The illegitimate births numbered 108, and were 5·3 per cent. of the total. In 1946 the total number was 105, and in 1945, 119.

*Deaths.*—The total number of deaths of Bootle residents during 1947, whether within or without the Borough, was 866; this figure includes 122 who died in institutions within the Borough, 367 who died in transferred institutions in Liverpool, 80 who died in hospitals outside the Borough, and 8 who died in mental hospitals, making a total of 577 deaths in institutions.

The age and sex constitution of the present population of Bootle differs appreciably from that before the war, and consequently the death rates are not truly comparable with those of earlier years. The deaths during the year, however, are equivalent to a death rate of 13·0 per 1,000, as compared with 12·3 per 1,000 in 1946.

The crude death-rate of the 126 great towns of England and Wales during 1947 was 13·0.

| Period.       | BOOTLE.       |                 | ENGLAND & WALES. |
|---------------|---------------|-----------------|------------------|
|               | Total Deaths. | Rate per 1,000. | Rate per 1,000   |
| 1873—1880 ... | 3,823         | 21·7            | 21·2             |
| 1881—1890 ... | 8,260         | 19·9            | 19·1             |
| 1891—1900 ... | 10,942        | 20·6            | 18·2             |
| 1901—1910 ... | 11,400        | 17·8            | 15·4             |
| 1911—1920 ..  | 12,470        | 17·1            | 14·3             |
| 1921—1930 ... | 10,336        | 13·5            | 12·1             |
| 1931—1935 ... | 5,212         | 13·5            | 12·0             |
| 1936—1940 ... | 5,019         | 13·8            | 12·5             |
| 1941 ...      | 1,227         | 23·3            | 12·9             |
| 1942 ...      | 629           | 13·6            | 11·6             |
| 1943 ...      | 745           | 14·9            | 12·1             |
| 1944 ...      | 732           | 13·1            | 11·6             |
| 1945 ...      | 754           | 12·9            | 11·4             |
| 1946 ...      | 793           | 12·3            | 11·5             |
| 1947 ...      | 866           | 13·0            | 12·0             |

The death-rate during the first quarter of the year was 16·1, during the second, 12·0; the third, 10·3; and the fourth, 13·9.

The number of deaths which occurred in institutions was 577, *i.e.*, 66·6 per cent. of the total deaths, as compared with 65·1 per cent. in 1946, and 61·4 per cent. in 1945. The increasing use made of institutions for the accommodation of cases of terminal illness is illustrated by a comparison with the percentage of 29 in 1920.

*Infantile Mortality.*—There were 185 deaths of infants, compared with 135 in 1946, and 99 in 1945. The infantile mortality rate was **91·5 per 1,000 births**, compared with 75 in 1946, and 75·7 in the decennium 1936 to 1946.

The rate of infantile mortality amongst males was 104, and amongst females 80. Throughout England and Wales the rate of infantile mortality was 41 per 1,000 births, and in the 126 great towns it was 47.



Thirty-four infants died before they were a week old, and a total of 74 of all the deaths under one year occurred in children under the age of one month. This is a neo-natal mortality rate of 36 per 1,000 births.

*Young Child Mortality.*—There were 30 deaths of children aged 1 to 5 years, as compared with 22 in 1946. The principal causes were—measles 3, diarrhoea 3, tuberculosis 2, meningitis 2, and violence 2.

*Uncertified Deaths.*—Sixty-six deaths (45 of residents and 21 of non-residents) were the subject of a Coroner's inquest, and in three cases the deaths were registered without certification by a medical man or a Coroner.

### CAUSES OF DEATH.

The causes of death, classified according to age, are shown in the table on page 40.

*Epidemic Diseases.*—The epidemic diseases (excluding influenza) were responsible for 9 deaths, as compared with the average of 34·6 during the preceding ten years. There were three deaths from measles, four from whooping cough, one from scarlet fever, and one from diphtheria. The deaths from diarrhoea and enteritis were 60 as against 24 during 1946; fifty-six were of infants under one year.

*Respiratory Diseases.*—The number of deaths from respiratory diseases was notably higher than that recorded in previous years. Pneumonia was responsible for 80 deaths, bronchitis for 42, and other respiratory disease for 5, making the total deaths from respiratory diseases (excluding influenza and tuberculosis) 127, or 14·6 per cent. of the total deaths at all ages, as compared with 107, or 13·5 per cent. in 1946. Influenza was recorded as a cause of death in one case, as against 8 in the preceding year.

*Cancer.*—Cancer was registered as the cause of death in 127 cases, as compared with 104 in the preceding year. This represents a cancer crude death-rate of 1·91 per 1,000 of the population as compared with 1·01 during the years 1911 to 1920, with 0·78 per 1,000 during the first ten years of this century, and with 0·55 during the ten years 1891 to 1900.

*Violence.*—There were 32 deaths from violence, and 1 from suicide.

### ECONOMIC CONDITIONS.

Valuable information as to economic conditions having a bearing on the health of the town is obtained from data kindly supplied by the Clerk to the Public Assistance Committee, and by the Clerk to the Bootle Insurance Committee.

During the year ended 27th December 1947, £34,524 was expended in outdoor relief, including £843 to unemployment cases (comparable figures for 1946 were £30,550 and £385). Further, the annual return of persons in receipt of Poor Relief on the night of 27th December 1947 shows 427 persons to have been in receipt of institutional relief, of whom 107 were persons not suffering from sickness, accident, or bodily or mental infirmity, and 1,145 persons to have been in receipt of domiciliary relief. The total number of persons in receipt of Poor Relief at the end of the year was equivalent to 235 per 10,000 of the population, as compared with 262 at end of 1946.

The following table summarises available information as to public assistance during recent years.

| Year. | Persons in receipt of relief on 1st January. |             | Total cost of outdoor relief. |
|-------|--|-------------|-------------------------------|
|       | Institutional                                | Domiciliary |                               |
|       |  |             | £                             |
| 1931  | 475  | 2864        | 47,865                        |
| 1932  | 375  | 3936        | 64,999                        |
| 1933  | 455  | 5659        | 82,843                        |
| 1934  | 431  | 6871        | 107,807                       |
| 1935  | 410  | 7270        | 113,130                       |
| 1936  | 548  | 6751        | 109,747                       |
| 1937  | 511  | 6586        | 74,727                        |
| 1938  | 480  | 4354        | 60,307                        |
| 1939  | 464  | 4124        | 58,982                        |
| 1940  | 357  | 2992        | 53,164                        |
| 1941  | 413  | 1775        | 25,544                        |
| 1942  | 412  | 1092        | 20,581                        |
| 1943  | 471  | 1036        | 21,763                        |
| 1944  | 512  | 923         | 27,184                        |
| 1945  | 575  | 1236        | 32,472                        |
| 1946  | 584  | 1100        | 30,550                        |
| 1947  | 427  | 1145        | 34,524                        |

The total number of insured persons in the Borough on 1st January 1948, was 35,175 or 52·8 per cent. of the total civilian population. There was a further rise in the number of prescriptions for insured persons made up during the year. It will be recalled that the number of these prescriptions dispensed rose from 50,738 to 164,253 between 1921 and 1937, with a corresponding increase in the annual cost of medicines from £1,955 to £5,149 6s. 5d., while this year the experience is 125,018 prescriptions at a cost of £8,842 16s. 0d.

## **II. GENERAL PUBLIC MEDICAL TREATMENT.**

The control of the transferred medical services remained with the Public Assistance Committee, although in November 1931 the Council delegated to the Health Committee the powers contained in Part I of the Local Government Act, 1929, with respect to the provision of hospital accommodation.

### **INSTITUTIONAL ACCOMMODATION FOR THE SICK.**

Arrangements continued to operate for the reception of Bootle sick into the hospitals transferred to the Liverpool City Council after the passing of the Local Government Act, 1929. Admissions during the year numbered 3,695 (including 633 births and 1,654 admissions on Masters' or Medical Superintendents' Orders).

### **DOMICILIARY MEDICAL ATTENDANCE.**

The administration of medical out-relief included in the functions transferred to the Council on 1st April 1930 is controlled by the Public Assistance Committee acting through the Medical Officer of Health, and the arrangements remained as described in earlier reports.

Examinations of the returns of surgery consultations and home visits during the year showed that the work remained relatively light, the weekly average having been 33 surgery consultations and 5 home visits in Districts 1 and 2, and 47 surgery consultations and 10 home visits in District 3.

### CANCER SCHEME.

The interim proposals of the Council under the Cancer Act, 1939, were outlined in the Annual Report for 1945.

Under these arrangements 47 persons received in-patient treatment and 115 persons received out-patient treatment at voluntary hospitals during 1947 at net costs of £773 1s. 7d. and £165 7s. 2d. respectively; in addition, other persons were treated at approved municipal hospitals.

### VACCINATION.

According to information supplied by the Vaccination Officer, 1,344 successful primary vaccinations and 11 successful re-vaccinations were performed during the year ended 30th September 1947, as compared with the previous year's figures of 1,155 and 31 respectively.

### AMBULANCE SERVICE.

Until 12th April 1947 the Accident and Sickness Ambulance Service was worked by one supervisor and fourteen male drivers and attendants, working as two teams in three eight-hourly shifts; as from that date the staff was reduced to one supervisor and seven male driver-attendants, working one team in eight-hourly shifts.

During the period 10th December 1946 to 9th December 1947 the Service answered 1,733 calls, as under:—

|                            | Day. |     | Night. |     | Total. |
|----------------------------|------|-----|--------|-----|--------|
| Hospital " transfers " ... | 283  | ... | 26     | ... | 309    |
| Accidents—                 |      |     |        |     |        |
| Docks ... ..               | 358  | ... | 44     | ... | 402    |
| Elsewhere ... ..           | 458  | ... | 41     | ... | 499    |
| Sickness and Maternity..   | 83   | ... | 28     | ... | 111    |
| Merseyside Hospitals       |      |     |        |     |        |
| Council                    | 269  | ... | 72     | ... | 341    |
| Crosby Borough Council     | 6    | ... | —      | ... | 6      |
| Other (unclassified) ...   | 50   | ... | 15     | ... | 65     |



### III. SANITARY CIRCUMSTANCES.

#### WATER SUPPLY.

Bootle is within the area of supply of the Liverpool Corporation Water Undertaking. The supply is by gravitation from upland sources in North Wales and Lancashire, is constant and, generally speaking, all premises are supplied from the mains of the Undertaking. During the year the supply has been adequate in quantity and first-class in quality; bacteriological examinations are made daily within the area of supply, and the supplies both from Rivington and Lake Vyrnwy are treated through slow sand filters and chlorinated. The water supply generally is not plumbo-solvent.

#### SANITARY INSPECTION OF THE DISTRICT.

*Nuisances.*—The number of nuisances for which notices were served on owners and occupiers was 8,660, as against 9,011 in 1946.

*Prosecutions: Non-abatement of Nuisances, Public Health Act, 1936, Section 93.*—No prosecutions were undertaken against owners of house property in respect of service of abatement notices upon them.

*Fertilisers and Feedings Stuffs Act, 1926.*—Eight samples of feeding stuffs and eight samples of fertilisers were obtained during the year.

*Canal Boats.*—During the year 31 visits of inspection were made to canal boats on the Leeds and Liverpool Canal in the Borough. One written notice was served during the year, and one infringement was remedied. No women or children were found on canal boats inspected in Bootle during the year. Bootle is not a Registration Authority under the Public Health Act, 1936 (Sec. 249).

*Verminous Infestation.*—The procedure adopted for dealing with dwelling-houses infested by bed bugs has been described in previous Annual Reports and during the year 30 municipal houses and 32 privately-owned houses required and received disinfestation by application of DDT in liquid and powder form. The furniture from 72 dwelling-houses was treated with Hydrogen Cyanide.

Houses found to be infested by cockroaches were also dealt with as described in earlier reports, and 34 municipal houses and 7 privately-owned houses were so treated during the year.

### RAT INFESTATION.

*Inspection of Lands and Buildings.*—The staff of three rodent operators, two permanent and one temporary, made 6,999 inspections of lands and buildings other than dwelling-houses, comprising in the main food shops and other shops, factories, warehouses, schools, offices, cold stores and other business premises, together with two refuse tips. From these inspections 101 or 1·44 per cent. were found to be infested, 52 by rats and 49 by mice. The staff treated 59 of these infestations, the remainder being treated either by servicing companies with departmental follow-up inspections, or being self-serviced under supervision by the staff. In all, the staff laid 1,258 poison baits with 709 takes and 98 bodies recovered. The only “major” infestation found during the year occurred in a railway embankment, which was subsequently cleared in co-operation with the Railway Company’s staff of rodent operators. The cold stores which was reported last year as being the subject of a “major” and later a “minor” infestation by mice has been kept under observation and treatment, and at no time since has this infestation exceeded in degree that of a “minor” infestation.

*Inspection of Private Dwellings.*—The systematic inspection of private dwelling-houses was continued during the year. Dwelling-houses to a total of 15,506 were visited, and infestations were recorded in 102 instances, 19 by rats and 83 by mice. All the infestations were slight in degree with the rats being migrants in each case. Each infestation was treated by the staff, who laid 2,079 poison baits with 1,129 takes, and 8 bodies recovered.

*Destruction of Sewer Rats.*—Two maintenance treatments of each of two areas in the Borough were carried out. The third area, which showed no takes of pre-bait when the initial treatments were carried out in December 1944, was test baited, with a like result.

### FACTORIES ACT, 1937.

*Factories.*—All factories are visited by an inspector appointed under the Act.

The total number of factories (including bakehouses) on the register was 276, viz. :—

|                          |     |     |     |     |
|--------------------------|-----|-----|-----|-----|
| With mechanical power    | ... | ... | ... | 212 |
| Without mechanical power | ... | ... | ... | 64  |

Visits to a total of 374 were made to factories in the course of ordinary routine inspections. As a result of these visits 39 defects were found, in respect of which 21 informal notices were sent to owners or occupiers; in the remaining instances a verbal intimation was sufficient, and at the end of the year two defects were outstanding.

*Outworkers.*—Ten visits were made to premises and in no instance was there found to be employment in unsatisfactory premises.

*Bakehouses.*—The number of bakehouses in use at the end of the year was 19, none of which are basement bakehouses; the number of bakehouses with mechanical power is 12; a total of 48 visits was made to the bakehouses, the general condition of which was good.

*Workplaces including Offices.*—The number of workplaces on the register was 148 and 170 visits were made. The number of defects found was 30, of which 28 were remedied at the end of the year.

#### IV. SANITARY CONTROL OF THE FOOD SUPPLY.

##### MILK SUPPLY.

*Source of Milk Supply.*—That portion of the milk supply of the Borough not brought by rail or road is derived from cows kept in shippens, of which there now remains only one in the town; the cows now number 21, as compared with a figure for 1914 of about 550. The shippen received the careful attention of the Inspector, who paid in all 14 visits.

*Dairies and Cowsheds: Milk and Dairies Regulations, 1926 to 1943.*—There are 22 premises registered as dairies or milkshops in the Borough, with one registered as a cow-shed, and there are 47 registered retail purveyors of bottled milk only. One hundred and forty visits of inspection were made to the cow-shed, dairies and milkshops during the year; on the whole it may be said that these premises are maintained in a satisfactory state.

*Cleanliness and Safety of Milk.*—The Milk (Special Designations) Orders, 1936-1943, prescribe the following special designations for milk, namely:—Tuberculin Tested, Accredited, and Pasteurised.

At the end of 1947 there was one Bootle dairyman holding a licence to produce Accredited Milk, one to produce Pasteurised Milk, two were holding a Dealer's licence in respect of Pasteurised Milk, and ten holding a Dealer's licence in respect of Tuberculin Tested Milk.

With the object of promoting the cleanliness and safety of the local supply bacteriological examination of milk samples has not been limited to the designated milks, and 141 examinations in all were made during the year.

*Milk and Tuberculosis.*—The results of bacteriological examination of 15 samples of milk showed that none were infected with tubercle bacilli.

*Pasteurised Milk.*—During the past year in Bootle one licence was renewed for the production of pasteurised milk. The number of milk samples obtained from this holder during 1947 was 28, of which 24 conformed to the requirements of the Ministry of Health. One hundred and fourteen samples of pasteurised and heat-treated milk were submitted for examination by the phosphatase test, of which number 104 satisfied the test.

#### PREPARATION OF ICE CREAM.

Bootle Corporation Act, 1930, Section 21, requires the registration of persons and premises used for the manufacture, etc., of ice cream, and gives powers for revocation of the registration of such persons if the Corporation is satisfied that the public health is, or is likely to be, endangered by any act or default of such persons.

At the end of the year the registrations totalled:—

##### Premises—

|  |        |    |
|--|--------|----|
| For the manufacture for sale and sale of ice cream | ...    | 13 |
| For the sale only of ice cream                     | ... .. | 29 |

##### Persons—

|  |        |    |
|--|--------|----|
| For the manufacture for sale and sale of ice cream | ...    | 13 |
| For the sale only of ice cream or water ices       | ... .. | 34 |



These special powers of supervision were obtained because of the necessity of ensuring the wholesomeness of milk products eaten largely by children, and during last season 70 visits of inspection were made to registered premises, and 30 samples were obtained and submitted for bacteriological examination. The samples were also submitted to the Methylene Blue Test in the form proposed by the Medical Research Council and recommended by the Ministry of Health, four provisional grades being defined, viz. :—

Grade 1. Time taken to reduce methylene blue—4 hours or more.

Grade 2. Time taken to reduce methylene blue— $2\frac{1}{2}$  hours to 4 hours.

Grade 3. Time taken to reduce methylene blue— $\frac{1}{2}$  to 2 hours.

Grade 4. Time taken to reduce methylene blue—0 hours (*i.e.*, reduction at the end of the incubation period).

The results showed that on bacteriological examination coliform bacilli were absent in 1/100th c.c. in 17 samples and present in 13 samples, and on submission to the Methylene Blue Test 5 were placed in Grade 1, 5 in Grade 2 and 20 in Grade 4.

The Ice Cream (Heat Treatment, etc.) Regulations, 1947, which came into partial operation on 1st May 1947, have improved the powers of control of this commodity. Of the 13 premises in the Borough registered for the manufacture for sale of ice cream improvements have been effected at all, with partial reconstruction in ten instances, and the introduction of new and modern plant in some cases.

It has been found that cooling apparatus is still difficult to obtain, and allowance has been made for this in the Regulations of 1947 and the Amending Regulations of 1948.

It is satisfactory to report that all connected with this trade in the Borough have given full support to the efforts of the department to implement the requirements of the Regulations; as evidence of this it

can be stated that of 10 samples obtained in April 1948 and submitted to the Methylene Blue Test 8 were placed in Grade 1, 1 in Grade 2 and only 1 in Grade 4.

### MEAT AND OTHER FOODS.

*Butchers' Shops, etc.*—Supervision of the materials and methods in foodshops, bakehouses, and factories, continued to be exercised by the Department on lines as indicated in previous Annual Reports.

*Food and Drugs Act, 1938.*—The Public Analyst, to whom samples were submitted, is Mr. J. F. Clark, M.Sc., D.I.C., F.R.I.C.

During the year 230 samples were taken, of which 6, or 2·6 per cent., were adulterated or not up to standard. One hundred and forty-six of these were taken informally, and in cases where adulteration was detected formal samples were subsequently obtained in order that the necessary legal action might be instituted. One hundred and nine samples of milk were obtained, of which twenty-six were taken informally; in the other 83 cases, however, the procedure prescribed by the Act was carried out. One of the samples of milk (informal) was found to be adulterated. A formal sample taken subsequently was found to be genuine. The vendor was interviewed and cautioned.

The total number of samples obtained of milk produced outside the district was 81, of which 15 were taken in transit.

*Public Health (Preservatives, etc., in Food) Regulations.*—A total of 161 samples was examined under these Regulations for the presence of preservatives, including 109 of milk. All the samples were found to be correct.

## V. PREVALENCE OF INFECTIOUS DISEASES.

The number of cases of infectious diseases notified during the year is summarised as follows:—

There was no notification of small-pox, cholera, plague, typhus fever, relapsing or continued fever, trench fever, or encephalitis lethargica.

|  | Cases notified. | Cases admitted to hospital. | Deaths. |
|--|-----------------|-----------------------------|---------|
| Enteric Fever ... ..   | 2 (1)           | 2                           | —       |
| Scarlet Fever ... ..   | 268 (4)         | 163                         | 1       |
| Diphtheria ... ..  | 64 (42)         | 64                          | 1       |
| Ophthalmia Neonatorum ... ..                                     | 1               | —                           | —       |
| Erysipelas ... ..  | 13              | 4                           | —       |
| Measles ... ..   | 349             | 38                          | 3       |
| Whooping Cough ... ..  | 145 (1)         | 34                          | 4       |
| Infantile Diarrhoea (under two years) voluntarily notifiable ... | 20              | 7                           | 59      |
| Acute Primary and Influenzal Pneumonia ... ..                    | 56 (1)          | 26                          | 20      |
| Cerebro-Spinal Meningitis ... ..                                 | 8 (6)           | 8                           | 2       |
| Malaria ... ..   | —               | —                           | —       |
| Dysentery ... ..   | 7               | 6                           | —       |
| Acute Poliomyelitis ... ..                                       | 5 (1)           | 5                           | —       |
| *Tuberculosis—   |                 |                             |         |
| (a) Pulmonary ... ..   | 123             | 86                          | 54      |
| (b) Non-Pulmonary ... ..   | 29              | 18                          | 7       |

\* Primary notifications.

(The totals in brackets give number of cases where diagnosis was not confirmed.)

#### LINACRE HOSPITAL.

The buildings of the Hospital for Infectious Diseases, after vacation by the Bootle General Hospital in March, were transferred to the Education Committee for use as administrative and school premises. Cases of infectious disease requiring hospital accommodation were admitted to the Liverpool City Hospitals in accordance with the arrangements made in September 1939.

#### ENTERIC FEVER.

Two cases of paratyphoid fever were notified during the year; in one case the diagnosis was revised to enteritis after admission of the patient to Fazakerley Hospital.

### SCARLET FEVER.

*Incidence.*—The total cases for the year fell from 298 in 1946 to 268 (four of these were re-classified later), constituting an incidence of 4.0 per 1,000 of the estimated population. There was one death.

In each of thirty-one houses two cases of scarlet fever occurred, in three houses there were three cases, and in one house there were four cases.

*Hospital Isolation in Scarlet Fever.*—One hundred and sixty-three cases, representing 60 per cent. of the notifications, were admitted to the Liverpool Isolation Hospitals during the year.

### DIPHTHERIA.

*Incidence.*—There was a decrease in the incidence of diphtheria from the figure of the previous year, and in all 64 cases were notified (42 were re-classified later) as compared with 141 in 1946 and 138 in 1945, and an average of 232 for the ten years ended 1945. The notification rate was 0.96 per 1,000 of the estimated population. All the notified cases were removed to Liverpool Isolation Hospitals during the year.

The occurrence of a secondary case of diphtheria in an infected household was recorded on two occasions, and the occurrence of a third case on one occasion.

*Mortality.*—There was one death from diphtheria during the year.

*Prevention.*—During 1952 a scheme was inaugurated whereby an offer of immunisation against diphtheria was made to the parents of infants and young children in the Borough. Last year, a total of 1,322 children (compared with 1,420 during 1946) completed the series of inoculations, making with those inoculated in preceding years a grand total of 16,712; further, 789 children previously inoculated received a reinforcing injection on reaching school age. The present position is that 46.5 per cent. of children under five years of age, and 64.9 per cent. of children between the ages of five and fifteen years have been protected against this preventable disease.

The following table shows year by year, since the inauguration of the scheme, the number of children completing the series of inoculations:—



# DIPHTHERIA IMMUNISATION.

21

| Age at date of inoculation. | 1932 | 1933 | 1934 | 1935 | 1936 | 1937 | 1938 | 1939 | 1940 | 1941 | 1942 | 1943 | 1944 | 1945 | 1946 | 1947 | Total.                  |
|-----------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-------------------------|
| Under one year              | —    | —    | —    | 1    | —    | 1    | 3    | 3    | 2    | 1    | 4    | 4    | 48   | 53   | 94   | 554  | Under five years — 3414 |
| 1-2 years                   | 6    | 5    | 36   | 34   | 31   | 32   | 46   | 44   | 43   | 45   | 196  | 314  | 459  | 720  | 649  | 417  |                         |
| 2-3 "                       | 12   | 11   | 39   | 75   | 40   | 48   | 46   | 46   | 46   | 64   | 239  | 250  | 157  | 154  | 81   | 48   |                         |
| 3-4 "                       | 15   | 22   | 62   | 70   | 47   | 46   | 33   | 49   | 29   | 108  | 208  | 156  | 74   | 91   | 60   | 36   |                         |
| 4-5 "                       | 18   | 28   | 43   | 55   | 46   | 35   | 33   | 37   | 22   | 76   | 209  | 193  | 100  | 52   | 64   | 37   |                         |
| 5-6 "                       | 142  | 242  | 311  | 279  | 278  | 191  | 334  | 66   | 15   | 213  | 405  | 338  | 221  | 211  | 352  | 187  | 5-10 years — 4248       |
| 6-7 "                       | 237  | 224  | 194  | 267  | 232  | 261  | 190  | 199  | 4    | 440  | 290  | 135  | 71   | 57   | 79   | 38   |                         |
| 7-8 "                       | 45   | 242  | 35   | 40   | 21   | 40   | 23   | 10   | 6    | 115  | 135  | 56   | 16   | 11   | 10   | 1    |                         |
| 8-9 "                       | 4    | 62   | 12   | 10   | 14   | 12   | 9    | 7    | 3    | 44   | 101  | 52   | 9    | 6    | 5    | —    |                         |
| 9-10 "                      | 2    | 20   | 9    | 6    | 4    | 3    | 1    | 6    | —    | 28   | 52   | 41   | 5    | 5    | 4    | 1    |                         |
| 10-11 "                     | 1    | 1    | 3    | 10   | 7    | 4    | 4    | 1    | 1    | 45   | 90   | 52   | 4    | 2    | 5    | 1    | 10-15 years — 3678      |
| 11-12 "                     | —    | 2    | 5    | 10   | 4    | 1    | 4    | 4    | 1    | 50   | 56   | 45   | 3    | 2    | 3    | 2    |                         |
| 12-13 "                     | —    | 1    | 1    | 4    | 7    | 2    | —    | 1    | —    | 38   | 80   | 38   | —    | 3    | 6    | —    |                         |
| 13-14 "                     | —    | —    | 3    | 2    | 4    | —    | 1    | —    | —    | 36   | 96   | 22   | 4    | —    | 2    | —    |                         |
| 14-15 "                     | —    | —    | 1    | —    | 1    | —    | —    | —    | —    | 30   | 58   | 15   | —    | —    | 1    | —    |                         |
| 15 years & over             | —    | —    | —    | —    | —    | —    | —    | —    | —    | —    | 28   | 2    | 1    | —    | 4    | —    | 4976                    |
| Age not known               | 100  | 120  | 19   | 2    | 76   | 29   | 20   | 5    | —    | 9    | 13   | —    | —    | 2    | 1    | —    | 296                     |
| TOTALS                      | 582  | 980  | 773  | 865  | 812  | 705  | 747  | 478  | 172  | 1342 | 2260 | 1713 | 1172 | 1369 | 1420 | 1322 | 16,712                  |

### OTHER NOTIFIABLE DISEASES.

*Acute Primary and Influenzal Pneumonia*.—Fifty-six notifications (one re-classified later) of primary and influenzal pneumonia were received. One death from influenza and 20 from primary pneumonia were recorded.

*Measles*.—Under the Measles and Whooping Cough Regulations, 1940, 349 cases of measles were notified; there were three deaths.

*Whooping Cough*.—Whooping Cough caused four deaths during 1947, compared with two in 1943 and one in 1945. The death-rate was 0·06 per 1,000 of the population, compared with 0·02 throughout England and Wales. The number of cases notified during the year was 145.

*Diarrhoea*.—Deaths from this disease numbered sixty, or a rate of 0·90 per 1,000 of the population, as compared with 0·37 last year. Fifty-six of the deaths occurred in infants under one year of age, giving a rate per 1,000 births of 27·8 in Bootle.

## VI. TUBERCULOSIS.

*Notification Register*.—The register on 31st December 1947 included 231 males and 219 females suffering from pulmonary tuberculosis, and 49 males and 76 females suffering from non-pulmonary tuberculosis, making a total of 575 cases, as compared with 583 at the end of 1946.

*Incidence*.—The total number of new cases notified during the year under the Public Health (Tuberculosis) Regulations, 1930 was 152 (123 pulmonary and 29 non-pulmonary) as compared with the figures of 150, 142, 169, 186, 162, 173, and 190 in the years from 1940 onwards.

*Mortality*.—The number of deaths caused by tuberculosis during 1947 was 61, or one death in every fourteen, giving a death-rate from this cause of 0·92 per 1,000 of the population, as compared with 1·20 in 1946, 1·01 in 1945, and 1·14 in 1944; it was 1·20 for the ten years ended 1945.

| Period.   | Bootle         |                 | England & Wales. |
|-----------|----------------|-----------------|------------------|
|           | No. of Deaths. | Rate per 1,000. | Rate per 1,000.  |
| 1891-1900 | 1108           | 2.17            | 2.01             |
| 1901-1910 | 1127           | 1.76            | 1.65             |
| 1911-1920 | 1370           | 1.82            | 1.42             |
| 1921-1925 | 652            | 1.70            | 1.08             |
| 1926-1930 | 572            | 1.49            | 0.94             |
| 1931-1935 | 537            | 1.39            | 0.81             |
| 1936-1940 | 411            | 1.12            | 0.67             |
| 1941      | 85             | 1.62            | 0.73             |
| 1942      | 63             | 1.37            | 0.65             |
| 1943      | 64             | 1.28            | 0.67             |
| 1944      | 64             | 1.14            | 0.63             |
| 1945      | 59             | 1.01            | 0.62             |
| 1946      | 77             | 1.20            | 0.55             |
| 1947      | 61             | 0.92            |                  |

*Dispensary Register.*—A register is maintained of all cases of tuberculosis receiving public medical treatment. On 31st December 1947 the number of definite cases on the register was 491, as against 448 on 1st January 1947.

#### PULMONARY TUBERCULOSIS.

*Incidence.*—One hundred and twenty-three new cases suffering from pulmonary tuberculosis were notified during 1947, a decrease of thirty-eight over the previous year; the number includes 17 cases not formally notified. The numbers notified in the five preceding years were 133, 157, 135, 142 and 161 respectively. In the case of three the first intimation was obtained from the death returns, while in ten other cases notification was made at intervals of less than three months before death. The non-notified deaths, therefore, numbered 5.5 per cent. of the total of 54 deaths from pulmonary tuberculosis.

*Mortality.*—During the year 54 deaths were certified to be due to pulmonary tuberculosis, representing a rate of 0.81 per 1,000 of the population, as compared with 1.04 in 1946, and 0.87 in 1945. There were 29 deaths among males and 25 among females.

*Chest Clinic.*—During the year the Tuberculosis Officer examined 348 patients newly referred; 272 patients were sent by private practitioners, 9 by the Maternity and Child Welfare Clinic Medical Officers, 12 by Army Medical Boards, and 55 by the School Medical Officers for opinion preliminary to notification. Attention continued to be paid to securing the attendance for examination of contacts of notified cases, and during the year 97 were so examined.

The total attendances at the Clinic during the year numbered 3,918, and 3,084 visits for various other purposes were made in addition; 434 specimens of sputum were examined, giving a positive result in 54 cases. The Tuberculosis Visitors made 763 visits to homes of tuberculous patients.

The X-ray plant at the Chest Clinic, which had been stored during the war-time use of the premises as a First-Aid Post, was renovated and replaced by February 1947, and 838 radiographic examinations were made with it during the year; before its re-installation 71 examinations were made at the Bootle General Hospital.

*Maghull Sanatorium.*—During the year 31 patients were admitted to the Sanatorium with an average length of stay of 180 days for the 29 cases discharged during the year. At the end of the year there were 10 males and 10 females in the Sanatorium. In addition, 55 other cases were admitted to hospitals outside the Borough.

#### MAINTENANCE ALLOWANCES.

During the year 125 applications for maintenance allowances under Memorandum 266/T. of the Ministry of Health were granted, the total disbursed amounting to £3,380 5s. 10d. In addition special payments were made for the provision of pocket money to patients in sanatoria, and with these and other allowances the total expenditure was £3,472 0s. 10d., as compared with £3,074 16s. 4d. in 1946.

#### NON-PULMONARY TUBERCULOSIS.

During the year 29 new cases of non-pulmonary tuberculosis were notified, as compared with 29 in 1946, and 31 in 1945, namely:—7 bones and joints, 9 glands, 7 meninges, and 6 other sites; and there were seven deaths registered. The agreement with the Leasowe Hospital for



Children for the maintenance of beds for children suffering from non-pulmonary tuberculosis remained in force, and at the beginning of the year nine cases were in hospital; four cases were admitted, five were discharged, and eight were still in hospital at the end of the year.

The scheme for admission to general or special hospitals of cases of non-pulmonary tuberculosis, and for payment by the Council of the charges for maintenance and treatment in cases recommended or approved by the Tuberculosis Officer, was continued; during the year twelve such patients were admitted.

*Public Health (Prevention of Tuberculosis) Regulations, 1925.*—No action was taken under the above Regulations relating to tuberculous employees in the milk trade.

*Public Health Act, 1936: Section 172.*—No action was taken under this Section dealing with the compulsory removal of cases of tuberculosis to hospital.

## **VII. VENEREAL DISEASES.**

The Council's scheme for the treatment and control of Venereal Diseases remains as described in previous reports, and there was a sustained national and local publicity campaign directed to secure the avoidance of infection or alternatively the continuance of efficient treatment.

The Annual Statistical Report of the Medical Officer of the Treatment Centre shows 639 persons under treatment on 31st December 1947, as against 692 on 1st January 1947, and an increase in new cases, the figure being 450 as contrasted with 356 in 1946. The increased figure, however, included 162 cases in which the diagnosis of venereal disease was not established, and there was in fact a substantial decrease in the new cases of gonorrhœa.

The total attendances for treatment made at the Centre during the year show a decrease from 9,579 to 8,262; the figure includes 561 attendances made between clinic days for the treatment of gonorrhœa at the irrigation centre. The average attendance at the male clinics was 33, and at the female clinics 17. During 1947, 250 cases were discharged on completion of treatment and observation, as against 270 in the previous year.

The following table is a statement of the number of cases presenting themselves for treatment during the last six years:—

#### BOOTLE VENEREAL DISEASES CLINIC.

|  | 1942 | 1943 | 1944 | 1945 | 1946 | 1947 |
|--|------|------|------|------|------|------|
| New Cases (total) ... ..   | 307  | 379  | 421  | 433  | 356  | 450  |
| New Cases (syphilis) ... ..  | 101  | 104  | 89   | 84   | 94   | 92   |
| New Cases (gonorrhoea) ... ..  | 115  | 113  | 117  | 206  | 249  | 186  |
| Total attendances (excluding Irrigation Department) ... ..                                       | 7071 | 9167 | 9407 | 8847 | 8786 | 7791 |
| Irrigation Department attendances ... ..   | 2627 | 3269 | 2261 | 1713 | 793  | 561  |
| In-patient Days ... ..   | 132  | 176  | 178  | 106  | 140  | 104  |
| No. discharged after completion of observation and treatment ... ..                              | 85   | 97   | 198  | 212  | 270  | 250  |
| No. who ceased to attend after completion of treatment, but before final tests as to cure ... .. | 1    | 1    | 1    | 11   | 44   | 135  |

Bootle residents accounted for 35·3 per cent. of the new cases under treatment at the Bootle Hospital Centre, the Authorities contributing the next largest number of cases being Liverpool with 20·2 per cent. and Lancashire County Council with 19·8 per cent.

Advantage has continued to be taken of intimations of suspected sources of infection to endeavour to bring the infecting agent under treatment, and in addition the clinic staff engaged on this duty have improved the "follow up" practice by visiting persistent defaulters from treatment to persuade them to receive attention; during 1947, 189 such visits were paid to 188 defaulters, and resumption of attendance was secured in 121 of these cases.

Under Defence Regulation 33B calling for notification of "contacts" of cases of venereal disease one Form I. was received; the contact was found and attended for examination.

### VIII. MATERNITY AND CHILD WELFARE.

#### ANTE-NATAL AND POST-NATAL SERVICES.

*Home Visiting of Expectant Mothers.*—Much can be done to promote normal childbirth by careful instruction as to general and personal hygiene and as to the need for suitable food, open air, exercise and rest, adequate sleep, and properly devised clothing. The Health Visitors paid 770 home visits and the Municipal Midwives paid 2,786 home visits to expectant mothers.

*Ante-Natal Clinics.*—Five Ante-Natal Consultations were held each week until February, when the increasing attendances made it necessary to establish a sixth session. During the year 1,645 new cases attended, corresponding to 82 per cent. of the total registered births; in addition, 399 cases carried over from the preceding year continued under supervision, and a total of 7,364 attendances was made, with an average of 25 persons per consultation. Further, it should be noted that patients intending to enter Walton Hospital for confinement usually attend the Ante-Natal Clinic held at that Institution.

*Dental Treatment of Expectant and Nursing Mothers.*—At the end of the year three half-days weekly were being devoted to the dental treatment of expectant and nursing mothers and the treatment given during the year has been in the nature of extractions and the supply of artificial dentures.

The number of patients treated during the year was 262, as compared with 198 in 1946, and the estimated cost of dentures supplied was £125, of which the patients' contributions were assessed at £89 10s. 9d.

#### MATERNAL WELFARE.

The Rules of the Central Midwives' Board require medical help to be sought by the midwife in all cases of illness of the patient, or the child, or of any abnormality occurring during pregnancy, labour, or lying-in, and 231 records of sending for medical help were received.

The Local Supervising Authority is responsible for the payment of fees to doctors called in by midwives, and in 1947 146 accounts, totalling £264 10s. 6d., in respect of cases where the doctor himself was unable to recover the fee, were sent in, as compared with 120 accounts, totalling £188 9s. 0d. in 1946. Of this sum, the contributions to be recovered from the patients were assessed at £154.

*Milk Assistance Scheme.*—The Council's Milk Assistance Scheme, under which dried milk is granted to expectant mothers and infants, was continued in full until 21st August 1940, on which date the scheme of the Ministry of Food for issuing National Dried Milk began to operate, with the result that there was a lessened need for the Council's Scheme; arrangements were however continued for the distribution of National Dried Milk through the Maternity and Child Welfare Clinics of the Local Authority as was the practice under the Council's Scheme.



Milk to the value of £2,538 3s. 1d. and Maltolime, Virol, Virolax and Emulsion to the value of £440 6s. 11d., making a total cost of £2,978 10s. 0d., was sold or issued free under the Council's Scheme, and under the Ministry of Food Scheme 38,356 packets (20 ounce size) were sold, and 1,736 packets were issued free on an income scale basis.

*Institutional Provision for Maternity Cases.*—Last year 633 patients were delivered in Walton Hospital at the cost of the Public Assistance Committee, 245 in the Municipal Maternity Home, and in addition 164 patients were delivered in voluntary hospitals. The total of 1,042 represents 51 per cent. of the births registered during the year, as compared with 56 per cent. during 1946.

*Maternity Home.*—The Municipal Maternity Home of eight beds plus two separation beds was re-opened on July 25th 1945, and 253 cases were admitted during the year; 224 were delivered by midwives and 21 by doctors. There were four still-births, one infant suffering congenital hare lip and cleft-palate died; there was no maternal death. Medical assistance was sought in 73 instances. There were no notified cases of puerperal pyrexia. The average duration of stay in the Home was 12.35 days.

*Nursing Homes.*—Three Nursing Homes of 11 beds (7 maternity), 7 beds (3 maternity) and 3 beds (maternity) respectively were on the Register throughout the year.

*Puerperal Morbidity and Mortality.*—There was no death from puerperal fever or other puerperal cause.

## MUNICIPAL MIDWIFERY SERVICE.

The staff of ten midwives during the year attended 817 patients, delivering 752 as midwives and assisting in 65 other instances as maternity nurses. Midwives book their own patients and are responsible for their ante-natal care from that date.

It will be seen that including maternity cases delivered in Walton Hospital and the Maternity Home, the municipality was responsible during 1947 for the conduct of 82 per cent. of the maternity work of the Borough.



## CHILD WELFARE.

*Notification of Births.*—The number of births notified under Section 203 of the Public Health Act, 1936, as adjusted by transferred notifications totalled 2,000 live births and 42 still births.

*Births Registered.*—The number of live births allocated to the district, *i.e.*, registrations adjusted for inward and outward transfers was 2,022. Of the number registered 108 were illegitimate.

The number of still births registered was 63, as against 54 for 1946.

*Infant Deaths.*—There were 185 deaths of infants under the age of twelve months, which total expressed as a rate of 1,000 births gives an infant mortality rate of 91·5, compared with 75 during 1946; there were 103 deaths of infant males and 82 of infant females.

The trend of infant mortality in recent years is set out in the following table:—

| Years   |     |     | BOOTLE | England and Wales |
|---------|-----|-----|--------|-------------------|
| 1901-05 | ... | ... | 166    | 138               |
| 1906-10 | ... | ..  | 130    | 117               |
| 1911-15 | ... | ..  | 133    | 110               |
| 1916-20 | ... | ... | 103    | 91                |
| 1921-25 | ... | ..  | 91     | 76                |
| 1926-30 | ... | ..  | 89     | 68                |
| 1931-35 | ... | ... | 87     | 62                |
| 1936-40 | ... | ... | 74     | 55                |
| 1941    | ... | ... | 108    | 59                |
| 1942    | ... | ... | 72     | 49                |
| 1943    | ... | ... | 76     | 49                |
| 1944    | ... | ... | 61     | 46                |
| 1945    | ... | ... | 69     | 46                |
| 1946    | ... | ... | 75     | 43                |
| 1947    | ... | ... | 91·5   | 41                |

Mortality was highest during the last quarter, with 54 deaths registered as against 37 in the last quarter of 1946.

The most important of the causes of death were:—diarrhoea and enteritis 56, bronchitis and pneumonia 39, premature birth 29, congenital malformations 12, atelectasis 6, and atrophy, debility and marasmus 5.

The rate of infantile mortality among legitimate infants was 91 and among illegitimate infants it was 111.

An analysis of infant deaths shows that enteritis regrettably regained the pre-eminence which it formerly enjoyed as the principal cause of infant mortality; deaths from this cause numbered 10 in the first four weeks after birth, 22 in the second and third months, and 24 in the age period four to twelve months. The incidence was greatest, as is to be expected, in the late summer, and 25 of the deaths occurred between 1st July and 31st October; and it is clear that increased vigilance of parents and of their advisers, the health visitors, is still called for whenever the country is favoured with continued hot weather.

The respiratory diseases, bronchitis and pneumonia, were responsible for the second largest group of infant deaths, with the expected seasonal excess in the first and second quarters of the year, with 11 and 14 deaths respectively, as compared with 8 and 6 in the last two quarters.

*Neo-Natal Mortality.*—Thirty-four children died before they were a week old, and a total of 74 of all the deaths under one year occurred in children under the age of one month, constituting a neo-natal mortality rate of 36.6 per 1,000 births. As noted above, prematurity constituted the third most prevalent cause of infant death and this condition was responsible for 25 of the neo-natal deaths; allied conditions were congenital malformation and defects in the respiratory mechanism which accounted for 13 other deaths. This field, difficult though it is to cultivate, obviously offers scope for future exertions.

*Care of Premature Infants.*—Special notification is made of infants in which the birth weight is 5½lbs. or less, and in such cases every effort is made to secure a separate bedroom for mother and infant and to provide special equipment including a draught-proof cot with detachable lining, warm suitable clothing, hot water bottles, and special feeding-bottles; if any of the latter requirements are not available they

are provided on loan from the Health Department. During the year 63 notifications of premature birth in Bootle were received—18 from births at home and 25 from births in maternity homes: no information is available as to the number of premature births to Bootle mothers confined in Walton Hospital. There were 29 deaths certified as due to prematurity, 3 at own home, 19 at Walton Hospital, 3 at Alder Hey Hospital, 2 at Liverpool Royal Infirmary, and 2 at private nursing homes.

On notification of a premature birth occurring at home, a medical officer of the Department gets in touch with the doctor in attendance, and if necessary visits the home to discuss the position with the doctor and the midwife, and before the midwife relinquishes responsibility arrangements are made for the health visitor for the district to take over early supervision. It will be seen however from the figure above that in this area the problem is largely one for hospital staffs.

*Public Health (Ophthalmia Neonatorum) Regulations, 1926 to 1937.*—One case of ophthalmia neonatorum was notified during the year: the vision was unimpaired. There were seven notifications in 1946.

*Home Visitation of Infants.*—There are nine officers on the Health visiting staff, some of whom, however, are also engaged in the school medical and tuberculosis services; the establishment is, therefore, equivalent to seven visitors giving their whole time to Maternity and Child Welfare duties in Bootle. The staff paid 16,341 home visits in all, including 8,758 visits to infants under one year, an average of 4·3 visits to each infant.

*Supervision of Young Children by Health Visitors.*—During the year the Health Visitors paid 6,706 home visits to children from one to five years.

*Infant Welfare Clinics.*—Four infant clinic sessions were conducted weekly until December, when increasing attendances made it necessary to establish a fifth session.

The following tabular statement gives the number of new infants presented for examination and advice, and the total yearly and average attendances at each Clinic:—

| Clinic.                        | New Cases.      |                    |             | Attendances.    |                    |              |                 |                               |
|--------------------------------|-----------------|--------------------|-------------|-----------------|--------------------|--------------|-----------------|-------------------------------|
|                                | Under one year. | One to five years. | Total.      | Under one year. | One to five years. | Total.       | No. of Sessions | Average attendance at clinic. |
| <b>Health Centre—</b>          |                 |                    |             |                 |                    |              |                 |                               |
| Monday afternoon ..            | 341             | 49                 | 390         | 2930            | 140                | 3370         | 49              | 68.7                          |
| Wednesday afternoon            | 361             | 32                 | 393         | 2866            | 523                | 3389         | 52              | 65.2                          |
| Thursday afternoon .           | 217             | 28                 | 245         | 2459            | 213                | 2672         | 51              | 52.4                          |
| <b>School Medical Offices—</b> |                 |                    |             |                 |                    |              |                 |                               |
| Tuesday afternoon ..           | 494             | 41                 | 535         | 3766            | 357                | 4123         | 52              | 79.3                          |
| Thursday afternoon..           | 8               | —                  | 8           | 10              | 2                  | 12           | 2               | 6.0                           |
| (from 4/12/47)                 |                 |                    |             |                 |                    |              |                 |                               |
| <b>Totals ...</b>              | <b>1416</b>     | <b>150</b>         | <b>1566</b> | <b>1202</b>     | <b>1535</b>        | <b>13566</b> | <b>206</b>      | <b>65.8</b>                   |

*Supply of Cod Liver Oil and Fruit Juices.*—The scheme of the Ministry of Food for distribution of fruit juices and cod liver oil to mothers and young children was continued during the year, and this valuable supplement to the vitamin content of their diet is now available, free or on payment, to all expectant mothers and to children up to the age of five years.

During the year the following were the total issues made to infants and expectant mothers through the Council's clinics and to Nursery Classes:—

|                         | <i>Free.</i> | <i>Sold.</i> | <i>Totals.</i> |
|-------------------------|--------------|--------------|----------------|
| Cod Liver Oil ... ..    | 14487        | 2            | 14489          |
| Orange Juice ... ..     | 3112         | 40804        | 43916          |
| Tablets (C.L.O.) ... .. | 3188         | —            | 3188           |

*Residential Nursery, Formby.*—This Residential Nursery, which was opened on 5th December, 1945, for the reception of twenty-two infants, has continued its valuable contribution to the maternity and



child welfare scheme in that it has accommodated the infants of mothers who are in hospital or maternity home as well as the infants of mothers whose economic status makes it necessary for the child to be temporarily cared for away from home.

During the year 71 children were admitted, 72 were discharged and 17 were in residence on 31st December 1947. The admissions included 27 children below the age of two years, and 44 children between the ages of two and five years, and of those discharged during the year 35 had a stay not exceeding five weeks, 18 remained for 5—10 weeks, 3 for 10—15 weeks, 9 made stays up to 30 weeks, and 7 remained for longer periods.

Of the admission during the year 46 were in respect of the mother's confinement, 10 in respect of the mother's illness, 5 on account of the necessity for the unmarried mother to take outside work, and 10 because of other social or economic difficulties.

The only incident of medical interest during the year was an outbreak of mumps commencing on 10th May introduced by a recent admission at a time when mumps was prevalent in the district.

The Nursery is a training centre for the Certificate of the National Nursery Examination Board, and seven nursery students are engaged on the two years' course of training: one student entered for and obtained the certificate during the year.

*Litherland Day Nursery.*—During the year twelve Bootle children were accommodated at the Lancashire County Council's Day Nursery at Litherland at the cost of the Maternity and Child Welfare Sub-Committee. The mothers' need for employment was the deciding factor for acceptance; in four cases the children were of parents who were living apart, in six instances the children were of unmarried women, in one case the mother was a widow, and in the remaining case the child as an orphan in the care of its widowed grandmother in regular work.

On 19th November intimation was received from the Lancashire County Council that, owing to the large waiting list of children resident in Litherland for whom Nursery accommodation was desired, it would

not be possible to admit any more children from the Bootle area, and it was requested that the four children then in attendance be withdrawn by 31st December. Three of the children were accordingly withdrawn, the County Council agreeing to the continued attendance of the remaining child as a special case.

*Nursing in the Home.*—By agreement the services of the Bootle District Nurses' Association are available for the nursing in their own homes of patients suffering from puerperal fever, measles, whooping cough, epidemic diarrhoea, ophthalmia neonatorum, pneumonia, and poliomyelitis. During the year 2,824 visits were paid to 236 cases.

*Convalescent Home Provision.*—The usual provision was made in the Maternity and Child Welfare Sub-Committee's estimates for grants towards the cost of treatment in convalescent homes for children under the age of five years. During the year, 14 children under five years of age and 159 children over that age received convalescent treatment.

*Child Life Protection.*—The powers in respect of the reception of children under the age of nine years for reward conferred on the Council by the Public Health Act, 1936, are administered through the Health Visitors, who supervised the general health and well-being of seven such children who were on the register on 31st December 1947.

*Care of Illegitimate Children.*—The numbers of illegitimate births registered in the Borough in the years from 1940 onwards have been as follows:—47, 51, 69, 88, 120, 119 and 105; and during the year 1947 there were 108.

Special arrangements for the care of illegitimate children have been operating for four years. They provide for one of the Health Visitors accepting responsibility for taking all possible and necessary action to help the unmarried mother and to safeguard the illegitimate child.

Some 27 cases were referred from ante-natal clinics, 15 from Walton Hospital, and others, making 68 in all, from welfare agencies or on their own application before the birth of the infants. With these and 33 other cases coming to notice after birth, 101 cases were supervised during the year by means of 1,950 home visits plus 130 private interviews and 15 visits to institutions, homes or nurseries. Five of the

unmarried mothers were admitted to Homes of the Moral Welfare Agencies at the cost of the Corporation. The final disposition of the infants was retention by the mother in 75 instances, legal adoption in 4, by care in institutions 7, or by removal or death in the remainder.

*Adoption of Children.*—Twelve persons gave notice of intention to make arrangements for the adoption of a child during the year under Section 7 of the Adoption of Children (Regulation) Act, 1939, and three children were under supervision at the end of the year. The cases received the necessary care and attention by the Health Visiting staff who paid 72 visits: and the department co-operates fully with Adoption Societies and the Liverpool Welfare Organisations.

*The Liverpool Child Welfare Association.*—This Association has continued to send workers to Bootle on five morning each week to facilitate the arrangements for dealing with recommendations of the medical staff of the Council or private doctors for the provision of surgical appliances, clothing, fireguards, cod liver oil, extra nourishment, or convalescent home treatment, to infants and school children.

During the year the Association dealt with 207 new cases (47 under 5 years and 160 over 5 years); 173 children were sent to Convalescent Homes, with an average stay for 14 children under five of 47·9 days and for 159 over five years of 32·1 days; in addition 9 babies were admitted to the Royal Liverpool Babies' Hospital, Woolton, with an average stay of 15·5 days.

The staff paid 1,985 visits and the interviews totalled 1,145.

*Domestic and Home Helpers.*—This service was established early in 1946 to provide domestic assistance to maternity cases and to persons sick or infirm (whether through old age or otherwise) who are unable to obtain such help, and a staff of three full-time and four part-time workers is now employed.

During the year 32 persons were assisted by home helpers (maternity cases) and 22 cases were assisted by domestic helpers (general sickness), and 4,342 hours and 5,054 hours respectively were worked by the staff in these cases.



## IX. HOUSING.

*Estimate of Housing Needs.*—The Annual Report for 1942 gave details under several headings showing that a responsible estimate of present housing needs approximated to 3,000 houses, with an ultimate requirement, which would be determined later by the nature and extent of re-planning, of the order of 7,000. At 31st December 1947 the number of unsatisfied applications for Corporation tenancies which had been received was 4,570, excluding applications which are on the Re-housing Department's waiting list. Of these applications 3,367 were from non-householders and 1,203 were from householders. In 1,165 cases applications were from families or persons living in one room and 1,203 from families or persons living in two rooms.

The overall position represents a worsening during the year in that the waiting list now contains 646 more names than at the end of 1946.

An allocation of 850 of the various types of prefabricated temporary houses was made to the Council, and 76 were erected and handed over by the Ministry of Works during 1945, 451 during 1946, 78 during 1947, and by the end of April 1948 further 206 had been erected and handed over. The remaining 39 are in course of erection on agreed sites.

As to permanent houses built by the Corporation during 1947, 70 houses replacing war-destroyed houses were erected and handed over, plus 8 bungalows and 6 A.3 type, and by the end of April 1948 further 6 A.3 type houses had been completed; the re-building of the war-damaged Corporation houses has now been completed. Further schemes are in progress for the erection of 234 new dwellings on various sites in and outside the Borough, and schemes are in preparation for the erection of 4,000/5,000 houses in Neighbourhood Sites Nos. 5, 6, and 7 (part) and 15 (part), which are situated in West Lancashire Rural District, except for parts of Units Nos. 5, 6 and 7, which are situated within the Borough.

By private owners, some 59 houses were completed during 1947, and further 2 were completed by the end of April 1948. In addition, schemes are in progress for the erection of 7 houses destroyed by enemy action.



*Town and Country Planning Act, 1944: War Damaged Areas.*—Preliminary work of inspection and survey was undertaken, in conjunction with the Borough Engineer, of certain areas of the town where war damage had been so extensive that, to achieve a satisfactory result, the lands should be laid out afresh and developed as a whole. Such preliminary inspection was completed in respect of an area of 130 acres (with 167 dwelling-houses) lying west of Rimrose Road and Derby Road, and of an area of 101 acres (with 951 dwelling-houses) lying between this area and the Liverpool/Southport railway line with the Bootle Goods Branch Railway cutting as its northern boundary. When reconstruction work again becomes possible it is intended to re-develop these areas as the first stage of re-development of the whole of the war-damaged and obsolescent areas in the Borough.

## **X. BLIND WELFARE.**

The duties of the Council under the Blind Persons Act, 1920, are administered in accordance with a revised scheme and regulations which received the approval of the Minister of Health in April 1934.

*Registration.*—During the year the Council's Ophthalmic Surgeon held four clinics and examined 18 cases; in addition 2 cases were examined in outside institutions. From this total of 20 examinations 12 cases were added to the register of blind persons; and there were also 4 transfer cases added. Eighteen names were removed, 12 owing to death, and 6 to removal outside the Borough, leaving a total on the register at the end of 1947 of 140 persons as compared with 141 last year. One hundred and twenty-five of these were resident in the Borough, two were in special Residential Schools, and thirteen were in other institutions.

*Residential Hostel.*—The residential hostel, accommodating 22 residents, which was opened in August 1946, continued to be a valuable element in the welfare scheme of the Council, and at the end of the year twelve persons were accommodated. The number had been reduced by death from the original seventeen, and in March 1948 the Council

approved a suggestion that some places be made available for sighted elderly persons who were already the liability of the Council or who would become so after the passing of the National Assistance Bill.

*Employment and Instruction.*—The registered blind are assisted and supervised by two Home Teachers giving the whole of their time to this work; during the year the Home Teachers paid 4,287 visits, gave 83 lessons at home, and disbursed the weekly money payments to necessitous cases.

During the year efforts were continued in conjunction with the local office of the Ministry of Labour and National Service to obtain employment in open industry for selected blind persons. At the end of the year eight were so employed as a result of these and other efforts.

The Council was on December 31st 1947 assisting 87 unemployable blind with money grants at a total weekly cost of £137 16s. 8d., the amount of relief being given varying from 10/7 and 6/8 to 53/7 and 48/- weekly (excluding sighted dependants allowance), for males and females respectively, with the maximum being paid in six cases (5 males and one female). In addition, eleven persons (10 males and one female) are employed at the Workshops for the Blind.

During the year nine applications for certification of blindness in order to take advantage of the Wireless Telegraphy (Blind Persons Facilities) Act, 1926, were granted.

*Domiciliary Medical Attendance.*—In May 1937 the Council instituted a Domiciliary Medical Service for the (non-insured) registered blind by arrangement with local medical practitioners who agreed to enter their names on a panel and to provide medical attendance for a capitation fee of the same amount as that obtaining under the National Health Insurance Acts; necessary prescriptions are dispensed by a similar panel of private chemists. The scheme was extended in July 1946 to include dependants of blind persons not covered by National Health Insurance, at a capitation fee of 15/-. The scheme works smoothly and satisfactorily, and the cost to the Council for the financial year 1947-48 was approximately £70 for the blind persons and dependants entitled to benefit; after 5th July 1948 this service will be provided under the National Health Service Act.

*Provision of Wireless Installations.*—Since October 1942 wireless installations have been provided for all blind persons in the Borough either through the local relay service or by battery sets. The service has been much appreciated and the cost to the Council for 1948-49 is estimated to be £140.

## **XI. CARE OF THE AGED.**

Early in the year the Council gave consideration to the care of the aged and were so fortunate as to enlist the co-operation of the Department of Social Science, University of Liverpool, in conducting a survey of the conditions under which elderly persons were living in the Borough, in order to assess the need for communal care and attention. The purpose of the enquiry was to gain information which would be helpful alike in the formation of a basis for social policy and for administrative action, and the enquiry was so designed that part of it may be repeated if necessary in later years in order to measure the progress made in the solution of the problems studied.

The investigation, which was commenced on 8th July, was based on information obtained from a random sample of 500 elderly people, and the subjects of the enquiry were directed to the usual points claiming attention in a social survey. The process of analysing and classifying the data has been actively proceeded with and it is expected that a report will shortly be published.

In association with this survey the Council decided to take immediate practical steps to alleviate conditions and established in August a service for the delivery, twice weekly, of hot meals in the homes of elderly persons who were unable to take advantage of Civic Restaurants and had difficulty in the preparation of their meals at home. Transport was provided by the Health Committee, which was indebted to a rota of voluntary helpers recruited by the Personal Service Society for the service of the meals to the recipients. The dinners were provided by the Civic Restaurants at cost price, and some 20 to 25 individuals have regularly profited by the scheme since its establishment.



[illegible]





## APPENDIX 3.

**NATIONAL HEALTH SERVICE ACT, 1946.**

*Proposals of the Council as approved by the Minister of Health.*

**PROPOSALS UNDER SECTION 22 (CARE OF MOTHERS AND YOUNG CHILDREN).**

**A.—GENERAL ARRANGEMENTS.**

1. *Administration.*—The service will be under the administrative control of the Medical Officer of Health acting on behalf of the Maternity and Child Welfare Sub-Committee of the Authority's Health Committee. The medical staff will comprise the Medical Officer of Health, the Deputy Medical Officer of Health, and two Assistant Medical Officers of Health, all giving a proportion of their time to this service.

2. *Joint Arrangements with other Local Health Authorities.*—Present agreement with Lancashire County Council for admission of certain children to Litherland Day Nursery will be continued.

3. *Arrangements with Voluntary Organisations.*—Present arrangements with the Liverpool Child Welfare Association will be continued, *i.e.*, a worker from the Association will attend at one of the clinics at specified times to facilitate arrangements for dealing with recommendations of the Authority's medical officers, or of general practitioners for the provision of surgical appliances, clothing, fireguards, extra nourishment, and convalescent home treatment.

Present arrangements with the National Society for Prevention of Cruelty to Children, the Liverpool Catholic Children's Protection Society, the Salvation Army and the Liverpool Diocesan Board of Moral Welfare will be continued.

4. *Liaison with other Bodies.*—It is proposed, in conjunction with the Regional Hospital Board, to secure proper co-ordination between the Council's arrangements for the care of mothers and young children with the hospital and specialist services. In particular, patients themselves desiring, or considered by the clinic medical staff to require hospitalisation will be referred to the Regional Hospital Board. The Regional Hospital Board will be requested to furnish the Authority with a weekly list of admissions and discharges of residents in the Authority's area.

It is proposed before the appointed day to ascertain from the Regional Hospital Board which of the present specialist facilities at clinics will be taken over and provided by the Board from the appointed day. The Local Health Authority propose to provide such of these facilities as are not taken over by the Board and to provide such additional similar facilities as may be found necessary.

Present arrangements will be continued whereby the part-time services of a specialist obstetrician are available once weekly at one of the ante-natal clinics, and on call for emergencies in the home of patients, and arrangements will be made, if possible, with the Regional Hospital Board, whereby this specialist obstetrician shall be the Medical Officer of the Board, having control of beds to which cases referred for hospital treatment will be admitted.

#### B.—PARTICULAR ARRANGEMENTS.

1. *Clinics.*—Clinics and sessions to be operated weekly by the Authority as follows:—

- (a) Number of ante-natal clinics—two; ante-natal sessions—six.
- (b) Number of post-natal clinics—one; post-natal sessions—one.
- (c) Number of infant welfare centres—two; infant welfare sessions—five.

2. *Care of Premature Infants.*—It is proposed in conjunction with the Regional Hospital Board, where necessary, to make special arrangements for the care of premature infants.

On receipt of notification the Assistant Medical Officer of Health (woman) will get into touch with the doctor in attendance and if necessary will visit the home to discuss the position with the doctor and midwife, and every effort will be made to secure hospital treatment.

If not admitted to hospital, then before the midwife relinquishes responsibility arrangements will be made for the health visitor to take over early supervision. Every effort will be made to provide for mother and child a separate bedroom and to provide special equipment, including a draught-proof cot with detachable linings, warm suitable clothing,

hot water bottles, and special feeding bottles, and if these are not available, they will be provided on loan by the Local Authority through the Health Department.

3. *Dental Care.*—Every expectant mother on her first visit to an ante-natal clinic and every nursing mother on her first visit to a post-natal or infant welfare clinic will be referred for dental examination and offered any necessary treatment, and every effort will be made to secure consent to continued supervision being given throughout the period of attendance both at the ante-natal and post-natal clinics..

The offer of priority periodical dental inspection, and if necessary, treatment, will be made in respect of every child in attendance at the Authority's infant clinics, and every effort will be made to secure the parents' consent to this course.

Particular attention will be given to conservative treatment.

The number of whole-time dentists and dental attendants employed by the Council for its education and maternity and child welfare duties will be increased from two to three, and the number of sessions devoted weekly to the dental care of mothers and young children will be increased from three to nine

The present arrangements for the supply of dentures by a private firm will be continued.

4. *Supply of Welfare Foods.*—The scheme will be continued whereby national dried milks and vitamin supplements are distributed by the staff of the local Food Office. Other infant foods, including special infant foods recommended as essential by the medical staff, will be supplied in approved cases through the Authority's clinics.

5. *Provision of Maternity Outfits.*—A supply of outfits under the charge of the Superintendent Midwife will be available in all cases attended by domiciliary midwives

6. *Nursery Provision: (a) Day Nurseries.*—Present arrangements with Lancashire County Council will be continued for user of Litherland Day Nursery.



(b) *Residential Nurseries*.—The present residential nursery, which is situate outside the Authority's area at Formby will be maintained for infants and young children whose mothers are for any reason unable to care for them.

It is intended that this nursery shall be provided in discharge of the duty placed on the County Borough Council by the Children Act, 1948, and that it shall be administered in the manner provided in that Act and the Regulations made thereunder.

(c) *Other Forms of Provision*.—Nil.

7. *Care of Unmarried Mothers and their Children*.—The present arrangements will be continued, *i.e.*, one of the Authority's health visitors, who has special experience, will act as executive officer responsible to the Medical Officer of Health for all necessary and possible action to help the unmarried mother and to safeguard the illegitimate child. The health visitor will receive early information from midwives, clinics, hospitals, maternity homes and social workers of cases where illegitimate children are to be, or have been, born, will co-operate with Moral Welfare Associations, will help in securing suitable accommodation, in finding employment, in obtaining affiliation orders, in finding suitable foster mothers, and in giving advice as to legal adoption.

Residential accommodation in Mother and Baby Homes will continue to be made available by arrangement with voluntary agencies, *i.e.*, Liverpool Catholic Children's Protection Society, the Salvation Army, and the Liverpool Diocesan Board of Moral Welfare.

*Development Plan*.—On the appointed day the area will be adequately provided for with the exception of Day Nursery accommodation.

This deficiency will be met by acquisition or construction of premises suitable for the reception of, say, 25 children, and the Authority will take steps to this end as soon as possible.

If experience shows that increasing births or other conditions necessitate an extension of the service or increase of staff, such extensions or increases will be provided and, in particular, early attention will be given to the desirability of increasing the number of child welfare sessions held.

## PROPOSALS UNDER SECTION 23 (MIDWIVES SERVICE).

*General Administrative Arrangements.*—The Authority will employ, under the administration of the Medical Officer of Health, one Superintendent Nursing Officer to co-ordinate the Midwifery, Health Visiting, and Home Nursing Services, and one Superintendent Midwife plus ten district midwives engaged in accordance with the terms and conditions of the Rushcliffe Committee's Report, and operating from their places of residence to allocated districts so far as possible; all the midwives will be employed full-time by the Authority. No arrangements will be made with voluntary organisations or other local health authorities.

*Supervision.*—One Assistant Medical Officer of Health (woman) will act as Medical Supervisor, with the Superintendent Nursing Officer as non-medical supervisor.

*Analgesia.*—As opportunity permits arrangements will be made for those midwives not already qualified in the administration of analgesics to receive the necessary training by arrangement with the Regional Hospital Board or otherwise. Apparatus will be provided for midwives already qualified and for other midwives as and when they qualify.

*Transport.*—Owing to the small area of the Borough it is not proposed at present to provide transport for midwives, except that a car, with driver, will be available at night. When, however, the administration of analgesia is undertaken arrangements will be made for the transport by motor-cars of midwives and equipment.

*Development Plan.*—It is considered that the above proposals will provide an adequate domiciliary midwifery service on the appointed day. In the event of expansion of the service being required, this will be undertaken as circumstances permit.

## PROPOSALS UNDER SECTION 24 (HEALTH VISITING).

*General Administrative Arrangements.*—In pursuance of the Act the scope of the service will be the visiting of persons in their own homes for the purpose of giving advice as to the care of young children, persons suffering from illness and expectant or nursing mothers, and as to the measures necessary to prevent the spread of infection. Health Visitors will continue to be employed in the School Health Service,

The Authority will employ under the administration of the Medical Officer of Health one Superintendent Nursing Officer and twelve whole-time health visitors, engaged in accordance with the terms and conditions of the Rushcliffe Committee's report, one health visitor will be mainly engaged in the care of unmarried mothers and their children, and the remainder will be engaged in general health visiting duties on a district basis, including work in connection with prevention of illness—care and after-care (Section 28), and in addition will attend at ante-natal, post-natal and infant clinics. No arrangements are proposed with voluntary organisations or other local health authorities.

*Transport.*—Owing to the small area of the Borough and the ample provision of public transport, no provision will be made for routine transport of health visitors.

*Development Plan.*—It is considered that the above proposals will provide an adequate health visiting service on the appointed day. The service will be developed as circumstances require and permit.

#### PROPOSALS UNDER SECTION 25 (HOME NURSING).

*General Administrative Arrangements.*—The Authority will provide a Home Nursing Service under the administration of the Medical Officer of Health by employing nurses directly. The direct supervision will be undertaken by the Superintendent Nursing Officer; and the present staff of the District Nursing Association, all resident, of one Matron (S.R.N.) and three Assistant Nurses, will be augmented by the appointment of one additional Nurse (S.R.N.) and all will be engaged in accordance with the terms and conditions of the Rushcliffe Committee's report; one or more of the Assistant Nurses will be replaced by Nurses (S.R.N.) as opportunity permits.

It is not proposed to make any arrangements with other voluntary organisations or other local authorities.

*Transport.*—Owing to the small area of the Borough it is not proposed to provide transport for nurses except that a car with driver will be available at night-time in emergency.

*Development Plan.*—It is considered that the proposals will require extension in the future to provide a total nursing staff equivalent to ten whole-time nurses either by increasing the whole-time staff or by employing part-time nurses.



## PROPOSALS UNDER SECTION 26 (VACCINATION AND IMMUNISATION).

### DIPHTHERIA IMMUNISATION.

A. *Children under Five*.—In order to ensure that as many infants and young children as possible are immunised facilities to be provided at Child Welfare Clinics and at such other centres as may be necessary; and at all such clinics or other centres special sessions to be arranged for the performance of immunisation.

Arrangements to be made, also, for the carrying out of immunisation in individual cases by general practitioners taking part in the Authority's scheme.

(a) A card register to be prepared of all births registered and of all inward transfers. On reaching age of 9 months a letter offering a specific clinic appointment for immunisation to be sent to parents. When attendance is made for first injection parent to be advised verbally of the date to attend with child for second injection. If first appointment is not kept a second letter to be sent stating times of all clinics and inviting attendance at any time found convenient.

After failure to attend for second injection a letter of appointment to be sent, to be followed in the event of further failure after fourteen days with another letter.

Failures to re-attend after these reminders to be reported to Health Visitors for following up.

Children immunised before reaching age of 2 years to be invited by letter at age of 4 years 9 months to attend at the clinic for a re-inforcing injection before commencing school life.

(b) Sessional arrangements to be made at such clinics or other centres as will make these facilities as readily accessible as possible to persons living in any part of the Authority's area; and sessions to be held with sufficient frequency and at such hours as will ensure that local requirements will be met without delay or difficulty for those wishing to take advantage of them.



(c) Immunisation to be constantly encouraged by the Authority's Medical Officers and Health Visitors. A supply of leaflets to be available for distribution by Health Visitors, and at each Infant Welfare Clinic.

(d) The public to be kept constantly informed, by appropriate means of publicity, of all the facilities provided for free immunisation, including the places and times at which sessions are held.

(e) Active and sustained health education about the need for immunisation to be maintained and use to be made of all available means to this end, including publicity material issued centrally by or in co-operation with the Ministry of Health.

B. *Children of School Age.*—(a) Sessional arrangements to be made for immunisation to be carried out at schools, and at such other centres (in conjunction, where appropriate, with arrangements for immunising children under school age also) as may be necessary. The same arrangements as for children under 5 to apply to children of school age as regards individual immunisation by general practitioners taking part in the Authority's scheme.

(b) Sessional arrangements to be made at schools or other centres as shall be adequate to meet local needs and to cause as little delay as possible after immunisation has been asked for by the parents.

(c) School teachers and persons engaged in the school medical service, in particular, as well as others whose duties afford them appropriate opportunity, to be expressly urged to encourage immunisation.

(d) The measures with regard to informing and advising the public about immunisation, as referred to above, in the proposals concerning children under 5 to be equally applied as regards children of school age.

(e) In connection with the above arrangements for the immunisation of children of school age systematic provision to be made for the administration of reinforcing injections as required.

C. *Records and Payment of Fees.*—Records in approved form, filing and sending out of all appointments to be done by the clerical staff of the Health Department. The register to be kept in alphabetical

order and in years of birth, the cards also being numbered serially. A key to the register analysed by these numbers in months for the registered births to be the basis of reference for further procedure.

Other authorities to be notified of children living in their area when immunised in this area.

Medical officers and general practitioners taking part in the Authority's arrangements to furnish particulars for record purposes in such standard form as may be recommended by the Ministry. On the basis of receiving such particulars the Authority to pay fees to general practitioners on such scales, according to circumstances, as are agreed upon between the Ministry and the profession.

D. *Medical Arrangements*.—As at present, immunisation to be performed mainly by the Authority's medical officers, but, again as at present, all local practitioners to be offered participation in the scheme by immunisation done privately, including free supplies of prophylactic material. The letter offering immunisation at 9 months of age to indicate that this may be undertaken by the parent's own medical practitioner if desired.

#### SMALLPOX.

(a) Arrangement to be made for the performance of infant vaccination in individual cases by general practitioners taking part in the Authority's scheme.

Arrangements to be made also, if necessary, for special sessions for infant vaccinations to be held at child welfare clinics or other centres. Steps to be taken to ensure that the advisability of infant vaccination is brought to the notice of parents of newly-born children.

(b) Sessional arrangements, if found to be required, to be made in the light of local needs and circumstances.

(c) Midwives and health visitors in particular, and all other persons whose duties afford them appropriate opportunity to be expressly urged to encourage infant vaccination: and administrative arrangements to be made with a view to relating the action taken towards securing vaccination to the registration of births.

(d) The public to be kept constantly informed of the facilities provided for free vaccination.

(e) Such measures of health education in the matter of infant vaccination as may be appropriate, to be adopted, and regard to be had in this respect to such advice as may be given by the Minister.

B. *Records and Payment of Fees.*—Records in approved form to be kept by the clerical staff of the Health Department with arrangements for inward and outward transfers.

Medical officers and general practitioners taking part in the Authority's arrangements to furnish particulars for record purposes in such standard form as may be recommended by the Ministry. On the basis of receiving such particulars the Authority to pay fees to general practitioners on such scales, according to circumstances, as are agreed upon between the Ministry and the profession.

C. *Arrangements in the event of an Outbreak of Smallpox.*—In such an emergency, if necessary, special vaccination sessions to be organised at the Authority's clinics, staffed by the Authority's medical officers and nurses who will give priority to the emergency.

Arrangements also to be made for the public to be advised about vaccination (or re-vaccination) as a precaution, and to be fully informed of all the facilities available, including the services of the family doctor.

All local medical practitioners to be pressed to undertake vaccination at their surgeries.

D. *Medical Arrangements.*—An opportunity to be given to every practitioner providing general services in the Authority's area under Part IV of the Act to provide services also under their arrangements for vaccination. This opportunity to be given also to general practitioners who do not intend to provide services under Part IV.

All necessary use to be made of the services of the Authority's own medical officers in administering its arrangements and in the carrying out of vaccination at clinics or other centres.



## PROPOSALS UNDER SECTION 27 (AMBULANCE SERVICES).

### 1. SERVICE PROPOSED TO OPERATE ON THE APPOINTED DAY.

A. *Co-ordination of Existing Services.*—The existing emergency accident, sickness and emergency service to be retained as main cover for all local emergency work (other than infectious disease) in the Borough including that part within the Dock Estate.

Existing arrangements with the Liverpool Corporation Ambulance Service to be continued to cover conveyance of general sick (including mental cases) and all infectious diseases.

The existing Tuberculosis Service to be discontinued; this work to be undertaken by the Liverpool Corporation Ambulance Service.

The work at present undertaken by the Merseyside Hospitals Council in so far as it affects this Authority's area to be continued as heretofore as an agency arrangement.

The financial arrangements shall be such as are approved from time to time by the Ministry of Health.

B. *Re-Distribution and Augmentation of Existing Resources.*—The Authority's ambulance service to be operated from the present ambulance station using two ambulances, *i.e.*, Ambulance No. 5 transferred from the Authority's discontinued Tuberculosis Service and either Ambulance No. 2 or 3, which ambulances will, on the appointed day, be transferred to the Minister. If in light of experience an additional vehicle is considered necessary immediate steps to be taken to procure it. Replacement to be made as necessary.

C. *Consultation with other Local Health Authorities.*—Proposals for a joint arrangement as between this Authority and Liverpool Corporation to be as in A above, consultations having already taken place between the two Authorities.

Additionally, a mutual aid agreement to be entered into with the Lancashire County Council with respect to the Emergency Service operated in the Borough of Crosby and at present operated by that Authority, to replace the mutual aid arrangement already in being.



D. *Staff*.—(i) As at present (ii) The existing staff and administrative arrangements to be retained unchanged. (iii) The Council will make arrangements for securing that, as far as possible, all ambulance drivers and attendants shall hold the first-aid certificate of the St. John Ambulance Association or the British Red Cross Society, or the St. Andrew Ambulance Association or such other first-aid qualifications as may be approved or prescribed by the Minister of Health.

E. *Maintenance and Servicing*.—The existing arrangements to be continued.

F. *Conveyance of Patients by Railway*.—Where it is necessary for the Local Health Authority to provide transport for a person who has to make a long journey and can without detriment to his health most conveniently be conveyed for part of it by railway, as a stretcher case or in some similar way involving special arrangements with the railway undertaking the Local Authority propose to arrange accordingly

G. *Call Out Arrangements*.—The Council will keep all hospitals and other institutions for the sick, all general medical practitioners, dentists, nurses, domiciliary midwives, the police, fire service and telephone authorities in or serving the County Borough informed of the action to be taken to call an ambulance.

## 2. DEVELOPMENT PLAN.

It is considered that as the above proposals will furnish an adequate day and night service in the Authority's area no further development of the service will be necessary.

## PROPOSALS UNDER SECTION 28 (PREVENTION OF ILLNESS—CARE AND AFTER-CARE).

### GENERAL ADMINISTRATIVE ARRANGEMENTS.

This Service will be administered by the Medical Officer of Health acting under a Care Sub-Committee of the Health Committee of the Authority.

A. *Tuberculosis*.—The Care Sub-Committee, with whom the health visitors of the Authority will work, will assist in the special problems of the tuberculous household, in such ways as (a) supplying or lending beds and bedding; (b) providing nursing requisites or sputum

flasks; (c) helping to provide extra nourishment or clothing; (d) assisting to make arrangements for boarding out children of infected parents; (e) helping to find better housing accommodation; (f) advising the patient and his dependants as to means of obtaining financial support available; and (g) helping suitable patients to obtain the benefit of arrangements under the Disabled Persons (Employment) Act, or otherwise to find occupation suitable to their condition.

Arrangements will be made with the Regional Hospital Board for the joint appointment of the medical specialist responsible locally for the treatment of tuberculosis in order that he may be closely associated with the care and after-care arrangements described above.

Further, the health visitors, and social workers (if any), of the Care Committee will spend part of their time in the tuberculosis dispensary working with the medical specialist.

*B. Mental Illness or Defectiveness.*—Details of the proposals of the Authority under Section 28 are submitted as requested in Circular 100/47, but in connection with the care and after-care arrangements of persons suffering from mental illness or defectiveness it may here be noted that two whole-time mental health workers will be charged with such duties and that use will be made of an Occupation Centre when such is available.

*C. Other Types of Illness (or Illness Generally).*—The Regional Hospital Board will be requested to notify to the local health authority particulars of persons discharged from hospital requiring after-care, and such cases and cases coming to light from other sources will receive appropriate after-care and advice of the nature indicated above in paragraph A from the Care Committee and its social workers (if any), and from the Authority's health visitors. The arrangements made in this respect will be such as will not fall to be made by the Authority within the scope of provisions of Part III. of the National Assistance Act.

So far as the Authority arranges for the follow-up of persons under treatment for, or known or believed to be suffering from, venereal disease, such arrangements will be carried out in co-operation with the Medical Officers of the Treatment Centres of the Regional Hospital Board.

D. *Provision of Sick-Room Equipment.*—Articles of sick-room equipment will be provided by the Authority on loan to persons being confined or nursed at home. No charge will be made for the loan of articles, but a deposit, to be refunded provided they are returned in good condition, will be requested unless the economic circumstances do not warrant it.

E. *Health Education.*—All suitable methods of health education as a means of prevention of illness and for securing intelligent care and after-care will be continued, including co-operation with the Bootle Executive Council, and use of the material and advice obtainable from the Central Council for Health Education or from other sources.

#### PROPOSALS UNDER SECTION 29 (DOMESTIC HELP).

*General Administrative Arrangements.*—The service will be administered by the Medical Officer of Health and directly supervised by the Superintendent Nursing Officer, and the present staff will be augmented, either by whole-time or part-time women, to a total equivalent of five whole-time workers, as found necessary to meet demand. Charges, appropriate to the means of the users of the service, will be recovered.

No joint arrangements are proposed with other local health authorities.

*Development Plan.*—It is considered that the whole of the area will be adequately covered in July 1948 by the service described above, this consideration being based on the fact that the existing demand has been satisfied with a smaller staff.

#### PROPOSALS UNDER SECTION 49 (MENTAL HEALTH SERVICES).

1. The Authority proposes to establish a Sub-Committee of the Health Committee to deal with their Mental Health Services, for the administration of which the Medical Officer of Health will be responsible. It is further proposed that the Mental Health Sub-Committee and the Medical Officer of Health shall be advised in the organisation and control of the service by a part-time specialist medical officer with experience in both mental illness and mental defectiveness, the services of such officer being made available by arrangement with the Liverpool City Council for the joint use of an officer to be appointed by them.



The medical direction of the service is the responsibility of the Medical Officer of Health, who will receive advice from the above-mentioned specialist medical officer.

2. From the above it will be seen that the Medical Officers to be employed in the service will be—the Medical Officer of Health devoting part of his time thereto, and a specialist medical officer devoting part of his time thereto. If such mental health medical officer is obtained by arrangement with Liverpool City Council it is proposed that by arrangement with the Liverpool Regional Hospital Board the services of one or more specialist medical officers shall be available in a consultative capacity in connection with the ascertainment of mental defectives. In general the ascertainment of such defectives would be the function of one or more of the three medical officers approved by the Ministry of Education for the ascertainment of ineducable children.

3. It is proposed to appoint one whole-time officer from one of the relieving officers at present in the service of Bootle Public Assistance Committee to act as an officer duly authorised to take initial proceedings under the Lunacy Act and Mental Treatment Act. Such "authorised officer" would devote his whole time to mental health work, including the voluntary supervision of defectives not subject to be dealt with under the Acts and patients discharged from orders under the Acts and by arrangement with the Mental Hospitals Board, the supervision of cases on licence under the Mental Deficiency Act. As such a male officer could not adequately deal with cases of both sexes a whole-time woman mental health worker would be appointed to undertake similar duties in connection with women and children.

The above "duly authorised officer" would be relieved when off-duty by arranging with Liverpool City Council for the services of one of their "duly authorised officers."

4. The "duly authorised officer" appointed by Bootle would operate from the Health Department, Bootle, and his substitute or relief would operate from a centre to be designated by Liverpool City Council.

5. The two whole-time mental health workers mentioned above would be employed in the training of defectives at home. The training of defectives in occupation centres would be provided by arrangement with the Lancashire County Council if the projected centre at Waterloo is then available,